PATENT APPLICATION SERIAL NO
------------------------------

## U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

03/22/2004 HDEMESS1 00000055 134125

10708724

01 FC:1001 02 FC:1201 770.00 DA 258.00 DA

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

38-2/(52503)

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
	· .		(Column 1)		(Column 2)		TYPE	TYPE		OR		
TOTAL CLAIMS			17					Ε	FEE		RATE	FEE
FC	OR .		NUMBER FILED		NUME	BER EXTRA	BASIC	FEE	385.00	OR	BASIC FEE	770.00
TC	TAL CHARGE	ABLE CLAIMS	/7 minus 20=		* . 0		X\$ 9	)=		OR	X\$18=	
INE	DEPENDENT C	LAIMS	6 mi	nus 3 =	* 3		X43	=		OR	X86=	258
MULTIPLE DEPENDENT CLAIM PRESENT							+145	=		OR		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTA		<u> </u>	OR	TOTAL	11128
	C			<u>,</u>	] •	OTHER	THAN					
		(Column 1)		(Colun	SMA	LL E	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=	•	OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=			OR	X86=	
		FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	OR	+290=	
	1 9 10 10 10 1								_	OB	TOTAL	:
		(Column 1)	ADDIT. F	EE L			ADDIT. FEE					
		CLAIMS		(Colum		(Column 3)			ADDI-	1		ADDI-
18		REMAINING AFTER		NUME PREVIO		PRESENT EXTRA	RATE	<u> </u>	TIONAL	1	RATE	TIONAL
IEN		AMENDMENT		PAID F	•	CATTA			FEE			FEE
AMENDMENT	Total	*	Minus	** ·		- ·	X\$ 9:	-		OR	X\$18=	
<b>AME</b>	Independent	*	Minus	thit	01.444	=	X43=		,	OR	X86=	
	FIRST PHESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		+145=	=	•	OR	+290=	
		TOT			OR	TOTAL						
ADDIT. FEE ADDIT. FEE  (Column 1) (Column 2) (Column 3)												
	\	CLAIMS	· -	HIGHE	_	(Column 3)		•	ADDI	- 1		ADDI
AMENDMENT C		REMAINING NUMB AFTER PREVIO		USLY	PRESENT EXTRA	RATE	l _	ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		-	X\$ 9=		,	OR	X\$18=	
	Independent	*	Minus	###		=	X43=				X86=	
٥	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR	700-	
+145= OR  * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290=	
**	f the "Highest Nu	mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	ADDIT. FE			OR ,	TOTAL ADDIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												